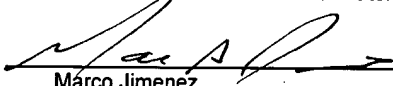
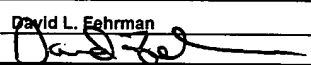
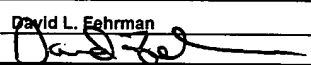
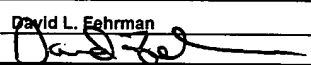


UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.	514802002700
	First Inventor	Shin-ichi HASHIMOTO
	Title	ELECTRON BEAM EXPOSURE APPARATUS, DEFLECTION APPARATUS, AND ELECTRON BEAM EXPOSURE METHOD
	Express Mail Label No.	EV147810715US
(Only for new nonprovisional applications under 37 CFR 1.53(b))		
CERTIFICATE OF MAILING BY "EXPRESS MAIL"		
Express Mail Label No.: EV147810715US Date of Deposit: September 26, 2003		
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
 Marco Jimenez		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450, Alexandria, VA 22313-1450																														
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original, and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <input type="text" value="22"/>] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <input type="text" value="3"/>]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <input type="text" value="3"/>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p>ACCOMPANYING APPLICATION PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (where there is an assignee) <input type="checkbox"/> Power of Attorney By Assignee</p> <p>11. <input type="checkbox"/> English Translation document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citation(s):</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) Should be specifically itemized</p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other</p>																														
<p>18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: *</p> <p>Prior application information: Examiner * Group / Art Unit: *</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																															
<p>19. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label or <input type="checkbox"/> Correspondence address below</p> <div style="border: 1px solid black; width: 300px; height: 80px; margin: 10px auto; text-align: center; font-size: 24px;">25224</div> <p style="text-align: center; font-size: 10px;">(Insert Customer No. or Attach bar code label here)</p> <table border="1" style="width: 100%;"><tr><td colspan="2">Name</td><td colspan="2">David L. Fehrman</td></tr><tr><td colspan="2">Address</td><td colspan="2">Morrison & Foerster</td></tr><tr><td colspan="2">City</td><td>Los Angeles</td><td>State</td><td>CA</td><td>Zip Code</td><td>90013</td></tr><tr><td>Country</td><td>US</td><td>Telephone</td><td>(213) 692-5051</td><td>Fax</td><td>(213) 692-5454</td><td></td></tr></table> <table border="1" style="width: 100%;"><tr><td>Name (Print/Type)</td><td>David L. Fehrman</td><td>Registration No. (Attorney/Agent)</td><td>28,600</td></tr><tr><td>Signature</td><td></td><td>Date</td><td>September 26, 2003</td></tr></table>		Name		David L. Fehrman		Address		Morrison & Foerster		City		Los Angeles	State	CA	Zip Code	90013	Country	US	Telephone	(213) 692-5051	Fax	(213) 692-5454		Name (Print/Type)	David L. Fehrman	Registration No. (Attorney/Agent)	28,600	Signature		Date	September 26, 2003
Name		David L. Fehrman																													
Address		Morrison & Foerster																													
City		Los Angeles	State	CA	Zip Code	90013																									
Country	US	Telephone	(213) 692-5051	Fax	(213) 692-5454																										
Name (Print/Type)	David L. Fehrman	Registration No. (Attorney/Agent)	28,600																												
Signature		Date	September 26, 2003																												

03940 U.S. PTO
10/6/2469

09/26/03

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

☐ Applicant Claims Small Entity Status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$750.00)

Complete if Known

Application Number	Not yet assigned
Filing Date	Concurrently herewith
First Named Inventor	Shin-ichi HASHIMOTO
Examiner Name	Not yet assigned
Group Art Unit	Not yet assigned
Attorney Docket No.	514802002700

METHOD OF PAYMENT

☐ Check ☐ Credit Card ☐ Money Order ☐ Other

Deposit
Account
Number

03-1952

Deposit
Account
Name

Morrison & Foerster LLP

The Commissioner is authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) required Under 37 CFR 1.16 and 1.17
☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large	Entity	Small	Entity
Fee Code	Fee (\$)	Fee (\$)	Fee (\$)
1001	750	2001	375
1002	330	2002	160
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80

Fee Description

Fee Paid

1001	750	2001	375	Utility filing fee	750
1002	330	2002	160	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$750.00)

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
12	3		0	18	\$0
			0	84	\$0

Large	Entity	Small	Entity
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9

Fee Description

1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claims, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$0)

** or number previously paid, if greater; For Reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large	Entity	Small	Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per properties (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	David L. Fehrman	Registration No. (Attorney/Agent)	28,600	Telephone	(213) 892-5601
Signature		Date	September 26, 2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.

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